FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 22 AM 11:14

DOCUMENT # N93000004785 (2)

1. Corporation Name
JACKSONVILLE MAZDA DEALERS ADVERTISING ASSOCIATI ON INC.

Principal Place of Business	Mailing Address
9850 ATLANTIC BLVD. JACKSONVILLE FL 32225	9850 ATLANTIC BLVD. JACKSONVILLE FL 32225

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/22/1993
3a. Date of Last Report: 08/10/1994
4. FEI Number: 59-3178373 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) Country (25)	Zip (29) Country (30)

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BUSH, JOHN P.
9850 ATLANTIC BLVD.
JACKSONVILLE FL 32225

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE John P. Bush — John P. Bush — 2-10-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	JAMES, STEVE G	1.2 NAME	
STREET ADDRESS	2915 NORWICH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRUNSWICK GA 31520	1.4 CITY-ST-ZIP	
TITLE	STD	2.1 TITLE	☐ Change ☐ Addition
NAME	BUSH, JOHN P	2.2 NAME	
STREET ADDRESS	9850 ATLANTIC BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32225	2.4 CITY-ST-ZIP	
TITLE	PD	3.1 TITLE	☐ Change ☐ Addition
NAME	BUSH, THOMAS M JR	3.2 NAME	
STREET ADDRESS	9850 ATLANTIC BLVD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32225	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	ANDERSON, A L JR	4.2 NAME	
STREET ADDRESS	2251 KNIGHT AVENUE	4.3 STREET ADDRESS	
CITY-ST-ZIP	WAYCROSS GA 31501	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	HUTCHINSON, BUDDY	5.2 NAME	
STREET ADDRESS	2898 US 1 SOUTH	5.3 STREET ADDRESS	
CITY-ST-ZIP	ST. AUGUSTINE FL 32084	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	ALBRITTON, PARTICK	6.2 NAME	
STREET ADDRESS	500 SOUTH FORST STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE CITY FL 32055	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John P. Bush — John P. Bush — 2-10-95 — 904-725-0911
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000004